

# Wisconsin Department of Corrections

Governor Scott Walker | Secretary Jon E. Litscher

# Office of Detention Facilities

January 31, 2018

Sheriff Mylan Fink Fond du Lac County Sheriff's Department 63 Western Ave Fond du Lac, WI 54935

RE: 2017 Fond du Lac County Jail Inspection

Dear Sheriff Fink:

On December 13<sup>th</sup> & 14<sup>th</sup>, 2017 the annual inspection of the Fond du Lac County Jail was conducted pursuant to Wisconsin State Statute 301.37(3). The inspection compared the facility and its operation to applicable state statutes and Department of Corrections Administrative Rule Chapter DOC 350. This report summarizes my findings, including the progress made following previous inspections, any current initiatives and any statute or administrative code violations.

On the date of the inspection there was a total population of 259. There were 245 adult inmates housed within the facility including 12 ES contract beds and 24 DCI contract beds. There were 14 inmates assigned to the GPS monitoring program and 0 SWRP.

# **Summary of Progress and Initiatives**

Operational changes and improvements:

- ✓ Electronic Medical Records via CorrecTek implemented in November
- ✓ Added another Taser Instructor and provided additional officers training
- ✓ Added 2 additional POSC Instructors
- ✓ Sent 2 Sergeants to Servant Leadership Training
- ✓ Increased Nursing coverage to 7 days per week
- ✓ Increased QMHP to 40 hours per week
- ✓ Updated the Hospital/Vigil/Transport policies and provided training
- ✓ Updated the inmate phone system to eliminate calling cards to phone time
- ✓ Narcan policy implemented and Sergeants trained
- ✓ Hired/trained 12 new Correctional Officers
- ✓ Updated the Inmate Observation/Watch forms
- ✓ All MSA fire tanks were sent in for hydro testing
- ✓ Updated the inmate blanket exchange procedure
- ✓ Maintenance completed in Sections C, D, F, & G Showers
- ✓ Trained 4 Officers in Classification
- ✓ Fond du Lac County Wrap Around Steering Committee Created- Inmate Reentry Program

- ✓ Improved hiring process and background requirements for new Correctional Officers
- ✓ Painting completed, identified graffiti areas addressed
- ✓ Grievance tracking procedure implemented

# Current Operational Initiatives:

- o Train all Officers in Narcan
- o Implement 12 hour shift / Pitman Schedule
- o 2 new Correctional Officer positions
- o 2<sup>nd</sup> Court Officer position
- o 1st shift Program Sergeant Position
- o Continue CorrecTek training
- o Increase Nursing coverage to 16 hours per day
- o Implement Nursing staff to conduct medication distribution
- o Continue to send Sergeants to Servant Leadership
- Update and implement select policies
- Debit Card for Money release
- Wrap Around Program
- Tax Intercept

# **Jail Operations**

# **Current Programming Opportunities-**

- Community Service Programming is available to save bed days.
- \* Religious Programming: 3 services weekly: Lutheran, Catholic and non-denominational.
- **❖** AA
- ❖ NA
- ❖ GED & Testing is coordinated through Moraine Park Technical College.
- Parenting Classes
- ❖ Anger Management Classes run 10 weeks with a certificate of completion.
- ❖ Domestic Violence Group Sessions St. Agnes
- Money Management and Financial Wellness

# Recommendations

• Medical and Mental Health- Review of current hours should be completed to ensure facility needs are being met with regard to overall provision to include the hours of service provision. Administration has identified an operational need for increased daily hours of medical coverage that I would encourage to be explored. ~ Repeat from previous inspection period.

On the date of the inspection there were **no violations of Administrative Code** found at the facility. Please extend my gratitude to Captain Kevin Galske and the remainder of the staff for their professionalism and for accommodating my inspection. The Correctional Division has a team of leadership in place that has done a great job of identifying areas and current process in place that are in need of potential review and modification in some instances. They have continued to strive forward over the past several years and are continually tweaking the operation to meet current standards for good correctional practice.

The Fond du Lac County Jail is approved by the Department of Corrections for the detention of adult offenders with a maximum capacity of 335. This approval is contingent on the correction of the violations detailed above and continuing compliance with all applicable Wisconsin State Statutes and administrative codes.

If I can assist you in any manner, or if you have any questions, please feel free to contact me.

Sincerely,

Nancy Thelen, Northeastern Region DOC-Office of Detention Facilities

Cc: Captain Kevin Galske, Jail Administrator

Kristi Dietz, Director - ODF

Regional file

# **CHAPTER DOC 350 INSPECTION DOCUMENT**

COUNTY:	Fond du Lac		ı	DΑ	TE: December 13 & 14, 2017
	IN	MA	ATE HOUSING AND CLASSIFICATION		
DOC 350.05	5 (3) (d) In jails that are construct	ed	or substantially remodeled on or after Sept	tem	nber 1, 2014, double cells shall have a
	of at least 25 square feet of unenc				
COMPLIAN	CE V	ΈR	IFICATION	_	
	leets standard		Policy and procedure manual review	$\neg$	Previous compliance documented
	leeds improvement	_	Sample of facility records reviewed	ī	Other (specify):
	lon-compliant		Sight confirmation by inspector		
	lot reviewed		Verbal confirmation by facility staff		
Comments:	N/A				
DOO 250 0	2 (2) (-1) POO 252 27 (4) In inite				
			are constructed or substantially remodeled of at least 70 square feet. NOTE: ODF red		
			990, a cell shall have a floor area of at least		
COMPLIAN	CE V	ΈR	IFICATION		
	leets standard	$\overline{}$		$\boxtimes$	Previous compliance documented
	leeds improvement	Ħ	Sample of facility records reviewed	Ħ	Other (specify):
	lon-compliant	Ħ	Sight confirmation by inspector	_	
_=_	lot reviewed	Ħ	Verbal confirmation by facility staff		
Comments:	All areas within the facility ha	IVE	met code requirements and previous	lv i	received DOC approval. There are
	15 beds that are utilized for de		·	ıy ı	received BGG approval. There are
Currently	To beds that are utilized for di	Jul	ne occupancy:		
DOC 250 26	Dauble celling If approved by	415.0	department the init shall have noticing an	al 15	recodures valeting to double colling
			department, the jail shall have policies and		
			all determine jointly the adequate staffing		
			d security of the jail staff and inmates whe d by the representatives of the county boa		
			all remain in effect until rescinded or amen		
_	rd and sheriff. Unless there is ad	equ	ate staff as agreed upon by the county bo	ard	l and sheriff, double celling may not
occur.					
The written	agreement between the County I	3oa	rd and Sheriff is on file with the departmen	nt a	nd contains the following elements:
	e County Board and Sheriff agree to				
			ealth care staff, support and service staff and	adr	ministrative staff
	e staffing pattern is detailed in the w				
- In	e agreement is signed by represent	auv	es of the County Board and the Sheriff		
COMPLIAN	CE V	ΈR	IFICATION	_	
N N	leets standard		Policy and procedure manual review	П	Previous compliance documented
	leeds improvement	X	Sample of facility records reviewed	Ħ	Other (specify):
	lon-compliant	Ī	Sight confirmation by inspector	_	· · · · · · · · · · · · · · · · · · ·
=_	lot reviewed	$\overline{\mathbb{X}}$	Verbal confirmation by facility staff		
Comments:	Policy # 211.16(D) A staffing	ac	reement was reached with the County	v F	Roard, citing Resolution 29-06 signed
	• • • • • • • • • • • • • • • • • • • •	_	be reviewed for accuracy and auther	•	
periods.	-, = : : : : : : : : : : : : : : : : : :		and dalilot		
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DOC-2744 (4/2015)					
DOC 350.20 (2) Inmates housed in the same under s. 302.36, Stats.	cell shall have the same custody classification	and be properly segregated as required			
COMPLIANCE	ERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments: Reviewed with Jail Administr	ation.				
DOO 050 00 (0) Farranda and farrada harria					
shall be maintained for single occupancy.	g areas, at least one cell or 15% of the jail's tota	al number of cells, whichever is greater,			
	/ERIFICATION				
Meets standard		Dravious compliance decumented			
	Policy and procedure manual review  Sample of facility records reviewed	Previous compliance documented			
Needs improvement	Sight confirmation by inspector	Other (specify):			
Non-compliant Not reviewed	Verbal confirmation by facility staff				
	<del></del>				
Comments: Reviewed with Jail Administr	ation.				
DOC 350 20 (4) Pagaining calls may not be	and for double commence				
DOC 350.20 (4) Receiving cells may not be u	ised for double occupancy.				
COMPLIANCE	'ERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
Not reviewed	Verbal confirmation by facility staff				
Comments: Receiving cells are single oc	cupancy only.				
maintain an objective prisoner classification eligibility criteria for prisoner participation in have policies and procedures relating to class DOC 350.21 (1) Description of the objective	shall meet the requirements set forth in s. 302.3 system to determine prisoner custody status an available work assignments, programs and consification.  prisoner classification system, including the idd reclassification procedures and prisoner appoints.	and housing assignment, and develop ommunity service projects. The jail shall entification and training of staff authorized			
DOC 350.21 (2) Eligibility criteria for prisone	er participation in available work assignments,	programs and community service projects.			
DOC 350.21 (3) Review of prisoner classification	ation decisions.				
<ul> <li>The jail has implemented an objective classification system based on point additive formula or decision tree forced choice or similar formalized mechanism for housing determination.</li> <li>A written policy is provided to all correctional staff detailing classification process.</li> <li>Policy clearly identifies personnel authorized to classify inmate housing assignments.</li> <li>Personnel assigned to complete inmate classification assignment receive formal training.</li> <li>A process is in place for supervising personnel to complete a secondary review of reclassification and appeals.</li> <li>Sufficient housing exists to meet classification guidelines to male and female inmates.</li> <li>Inmates housed in the same cell shall have the same security classification and be properly segregated as required in s. 302.36 Stats.</li> </ul>					
COMPLIANCE	'ERIFICATION				
Meets standard	Policy and procedure manual review	Previous compliance documented			
Needs improvement	Sample of facility records reviewed	Other (specify):			
Non-compliant	Sight confirmation by inspector				
	Verbal confirmation by facility staff				
	n is currently through a decision tree syste	em. All offenders are classified and			
reclassified following set timeframes ar	nd on an as needed based regarding beha e taken seriously and reportedly have cor	avior and other mitigating factors.			

# **SAFETY AND SECURITY PRACTICES**

DOC 350.18 Security. The jail shall have policies and procedures relating to jail security.

- Portable communications and alarm systems are in good working condition
- Intercom and emergency notification devices are in good working order

DOC 350.18 (1) Inmate supervision. The jail shall have a system providing for well-being checks of inmates. Policies and procedures shall provide that all inmates are personally observed by jail security staff at staggered intervals not to exceed the following: (a) 60 minutes (b) 15 minutes for inmates housed on suicide watch.

- All inmates are personally observed during each physical inspection.

•	In housing units of multiple cells, off	icers	are encouraged to complete physical inspection	ons	from within the housing unit.
	350.18 (2) Supplemental observation vations.	n. A	video monitoring system may be used to su	ıpp	plement but not replace personal
DOC:	350.18 (3) Documentation. Each ob	serva	tion shall be documented.		
COMF	PLIANCE	VE	RIFICATION		
$\boxtimes$	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Comments: Policy # 213.05 Documentation indicates security checks are being completed approximately minutes in some areas, while approximately in other areas. Paper format documentation was reviewed as a part of the inspection process. These logs are maintained in conjunction with the Pipe/Wand system.  Administration is reviewing documentation to ensure proper climate and offender activity documentation.  Suicide watch logs reviewed on the date of the inspection indicated much improvement with regard to the 15 minute requirement being met. This has been identified by administration as an area of focus and it has notable improvement.  DOC 350.18 (4) Inmate counts. Description of the system for physically counting inmates. Formal counts shall be completed and documented at least three times per day, with a minimum of one count per shift.  COMPLIANCE  VERIFICATION  Policy and procedure manual review  Previous compliance documented  Needs improvement  Sample of facility records reviewed  Other (specify):					
	Non-compliant  Not reviewed	X	Sight confirmation by inspector  Verbal confirmation by facility staff		
		script	ions of procedures for conducting and doc		•
COME	·				
	PLIANCE Masta standard	VEI	RIFICATION		Draviava samplianas de consente d
			Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed  Sight confirmation by inspector		Other (specify):
	Non-compliant Not reviewed	X	Verbal confirmation by facility staff		
	nents: Policy # 212.02 Document 350.18 (6) Inmate searches. Descrip	atior	n is completed and reviewed.	ent	ing inmate pat down, strip and body cavity
		\/⊏	DIFICATION		
	PLIANCE Masta standard	٧Ŀ١	RIFICATION		Dunidana agraphica and de accessore d
			,	$\boxtimes$	•
	Needs improvement	$\boxtimes$	Sample of facility records reviewed	Ш	Other (specify):
<u> </u>	Non-compliant		Sight confirmation by inspector		
	Not reviewed	X	Verbal confirmation by facility staff		

Comments: Reviewed with Jail Administration.

			nthly inspections shall be made to determining order. Each inspection shall be docu		if all jail doors and locks within and to the
Joou	o permitter of the facility are in good v		ang orden. Edon mopeotion ondi be deed		itodi.
•	The remote security controls of doors				
•	All manufacturing doors, locks and rele				
			operating all locks, doors and releases.		
		/EF	IFICATION		
$\geq$			Policy and procedure manual review	<u>×</u>	Previous compliance documented
	Needs improvement	$\underline{\boxtimes}$	Sample of facility records reviewed	Ш	Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
			hanisms are checked on a monthly ba		
			nted on newly implemented forms no		
			and include who completed the repa		
resp	onsibility of the 3" shift Officers un	ide	r the primary direction of an assigned	Se	ergeant.
DOC	350.18 (8) Key control. Control and us	e o	f jail keys, including all of the following:		
(	a) All issued keys shall be inventoried an	d a	ecounted for at shift change		
			nd accessible in the event of an emergency		
(	c) Inmate are not permitted to handle or	utili	ze jail keys.		
СОМ	PLIANCE \	/ER	IFICATION		
$\boxtimes$	Meets standard		Policy and procedure manual review	$\boxtimes$	Previous compliance documented
	] Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):
	] Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Comr	nents: Policy # 213.03 This inform	ati	on is captured at shift change via JMS	3.	
DOC	350.18 (9) Weapons control. Introduct	ion	, availability, control, inventory, storage ar	nd u	se of firearms, chemical agents.
					uthority required for their access and use.
COM	PLIANCE \	/FR	IFICATION		
NOO!			Policy and procedure manual review	$\boxtimes$	Previous compliance documented
	Needs improvement	H	Sample of facility records reviewed	$\frac{\square}{\square}$	·
-	Non-compliant	<u> </u>	Sight confirmation by inspector	<u> </u>	Other (specify):
- <b>-</b>		$\frac{\square}{\square}$	Verbal confirmation by facility staff		
			verbal committation by facility staff		
Comr	nents: Policy # 213.04				
DOC	350.18 (10) Tools and sharps control.	Int	oduction, availability, control, inventory, s	tora	age and use of tools and sharps within
	icility.		, , , , , , , , , , , , , , , , , , ,		.go po
•	Documentation of the control and inve	nto	ry is maintained		
COM	PLIANCE \	/EF	IFICATION		
$\geq$	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Comr	nents: Gun lockers are provided pri	or	to entry of the facility. Other sharps a	ind	tools within the facility are under
			ise bags have been added to the mor		
			_		

DOC 350.19 Fire Safety. The jail shall have policies and procedures relating to fire safety.

DOC 350.19 (2) Each jail shall develop a fire safety policy in accordance with local fire department recommendations that addresses all of the following:

- Local fire department inspection requirements under sub. (5).
- Fire protection equipment location and maintenance. Each jail shall have and shall properly maintain fire alarms, smoke and thermal detectors, fire extinguishers and self-contained breathing apparatuses which operate for at least 30 minutes.
  - Fire extinguishers are properly maintained with recorded time and date of inspection.
  - Fire extinguishers are properly placed, secured and easily accessible to staff.
  - A fire extinguisher suitable for grease fires is provided in the kitchen.
  - Jail staff can demonstrate proficiency in the use of fire protection equipment.
- c) Training of staff in equipment use and the evacuation of inmates

d	<ul> <li>Staff training is documented.</li> <li>d) A written evacuation plan</li> <li>Jail staff can articulate or demonstrate the evacuation routes and policies of the jail.</li> </ul>							
COMF	COMPLIANCE VERIFICATION							
$\boxtimes$	Meets standard		Policy and procedure manual review	П	Previous compliance documented			
Ī	Needs improvement	靣	Sample of facility records reviewed	Ħ	Other (specify):			
	Non-compliant	$\bar{\Box}$	Sight confirmation by inspector		(1 7/			
	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff					
equip	oment was completed at the Marc	า 2	ers and SCBAs are checked on a more 017 inservice.  d as part of the evacuation plan under sub		, ,			
	for jail staff in the jail.			ι,	((,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
COM	PLIANCE	/EF	RIFICATION					
$\boxtimes$	Meets standard		Policy and procedure manual review	$\boxtimes$	Previous compliance documented			
	Needs improvement		Sample of facility records reviewed		Other (specify):			
	Non-compliant	$\boxtimes$	Sight confirmation by inspector					
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff					
Comn	nents: Reviewed with Jail Administr	ati	on.					
	350.19 (4) Fire safety evacuation and ones. Each practice or simulation shall be		er procedures shall be practiced or simulat ocumented.	ed I	by all jail staff at least once every 12			
COM	PLIANCE	/EF	RIFICATION					
$\boxtimes$	Meets standard		Policy and procedure manual review		Previous compliance documented			
	Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):			
	Non-compliant		Sight confirmation by inspector					
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff					
curre	ent updated policies and develop t	rair	istration is also currently working with ning exercises. Exercises that have be ning on evacuation was completed at	eei	n completed in the past continue to			
DOC:	350.19 (5) The facility shall be inspected	ed I	by the local fire department at least once ev	/er\	12 months and a record thereof shall be			

Not reviewed Verbal confirmation by facility staff Comments: Fire Department inspections were completed on 4/06/17 & 10/23/17.

The fire inspection report supports that the facility conforms to applicable fire safety codes.

Policy and procedure manual review

Sample of facility records reviewed

Sight confirmation by inspector

**VERIFICATION** 

maintained.

**COMPLIANCE** 

Meets standard

Non-compliant

Needs improvement

Previous compliance documented

Other (specify):

		.19 (6) There shall be monthly inspons shall be documented.	ect	ions of the facility to ensure compliance wit	h s	safety and fire prevention standards.
COM	IPLIA	ANCE \	VER	RIFICATION		
		Meets standard		Policy and procedure manual review	J	Previous compliance documented
		Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed	Ī	Other (specify):
		Non-compliant		Sight confirmation by inspector	_	
	1	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		
		ts: Monthly forms are utilized ar components.	nd ı	review has been completed to ensure t	∶h€	e current documentation includes all
DOC prev	350. ent d	.22 (1) Jail staff may use physical f death or bodily injury to the staff mo	orc emb	olicies and procedures for the use of force. e against an inmate only if force is necessar per, the inmate or someone else, unlawful da ount of force reasonably necessary to achie	ry i	age to property, or the escape of an
COM	IPLIA	ANCE \	√ER	RIFICATION		
	1	Meets standard		Policy and procedure manual review	$\exists$	Previous compliance documented
		Needs improvement	$\boxtimes$	Sample of facility records reviewed	Ī	Other (specify):
		Non-compliant		Sight confirmation by inspector		
	1	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		
adm	inistr	rator or the staff member's supervi	sor nerv	d force to control an inmate or inmates shall describing the incident. The report shall incident authorized by the sheriff or sheriff's described documented.	clu	ide all known relevant facts and be
COM	ΙΡΙΙΔ	•		RIFICATION		
	_	Meets standard			<u> </u>	Previous compliance documented
	7	Needs improvement	H	Sample of facility records reviewed	十	Other (specify):
<del></del>	<del>- </del>	Non-compliant	H	Sight confirmation by inspector		Other (specify).
<del></del>	+	Not reviewed	$\forall$	Verbal confirmation by fracility staff		
Com	<u> </u>			pment was completed at the March 20	17	7 inservice.
DOC the s	350. 350. 350. shift,	.23 (1) Restraint devices are never Inventories are conducted and do .23 (2) When an inmate is mechani	use cun call e sh	y restrained for non-routine purposes, a wri eriff or sheriff's designee. Documentation s	r th	han necessary. en report must be completed by the end of
COM	IPLIA	ANCE	VER	RIFICATION		
<u> </u>		Meets standard	$\overline{\Box}$		$\overline{A}$	Previous compliance documented
	<u> </u>	Needs improvement	Ħ	Sample of facility records reviewed	Ť	Other (specify):
一片	1	Non-compliant	Ħ	Sight confirmation by inspector		(50.50)
Ī	ī	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		
Com	ment	s: Staff training on the use of e	qui	pment was completed at the March 20	17	7 inservice.

DOC 350.24 Discipline. The jail shall have policies and procedures outlining inmate discipline and due process.

DOC 350.24 (1) Inmates rules of behavior. Every jail shall have written rules of behavior for inmates. At the time of admission, each person shall be notified verbally of the existence of jail rules for inmate behavior and the potential disciplinary actions for violations of the rules. Each inmate shall be provided with a copy of the jail rules or copies of the rules shall be posted in conspicuous places in the jail.

### DOC 350.24 (2) Discipline for minor violation. (See code for specific language.)

- (a) A minor discipline is a verbal or written reprimand, restriction of privileges or placement in disciplinary segregation for 24 hours or less.
- (b) Inmate is informed of violation, potential discipline and disciplinary procedures for minor violations.
- (c) Inmate has opportunity to make verbal statement about alleged violation to a staff member
- (d) Staff member may impose a minor discipline if found that violation occurred
- (e) Supervisor is informed of incident by staff member. If supervisor concludes violation is major, then it shall be handled in accordance with Sub. (3). If supervisor finds that no violation occurred, the inmate shall be notified that the charge has been dismissed.
- (f) Inmate is notified of right to appeal and of appeal procedure.
- (g) Information made part of inmate's file. If supervisor finds no violation occurred, the due process records shall reflect those findings.

### DOC350.24 (3) Discipline for major violation. (See code for specific language.)

- (a) A major discipline is restriction of privileges for more than 24 hours, placement in solitary confinement for more than 24 hours in accordance with s. 302.40, Stats., loss of good time in accordance with s. 302.43, Stats., restrictions affecting Huber law privileges in accordance s. 303.08, Stats., or restrictions affecting work release in accordance with s. 303.065, Stats.
- (b) Written report to supervisor within 24 hours of incident
- (c) Inmate notification of charges and right to hearing 24 hours in advance of hearing.
- (d) Due process hearing within seven calendar days, unless inmate waives the right to a due process hearing.
  - 1. Impartial hearing officer or committee (not involved in incident)
  - 2. Inmate's right to be present at hearing, make a statement and present evidence. Reason for inmate's absence documented.
  - 3. Inmate's right to present witnesses. Reason for absence of witness documented.
  - 4. Inmate's right to staff advocate if inmate is illiterate or if issues are complex.
  - 5. Hearing officer may consider inmate's mental illness, developmental disability or other emotional or mental disability as a mitigating factor in imposing discipline.
  - 6. Written decision stating discipline administered. Copy to inmate.
  - 7. Inmate is notified of right to appeal and appeal procedure
  - 8. Incident information, discipline administered and decision shall be made part of inmate file. If found no violation occurred, the due process records shall reflect those findings.
- e) If inmate waives right to a due process hearing, violation shall be disposed of in accordance with procedures for minor violations. Major discipline may be imposed if relevant staff member finds a violation occurred. Waiver does not constitute an admission of the alleged violation.

350.24(4)	Classification.							
(a)	(a) An inmate may be evaluated for custody classification following the imposition of discipline.							
COMPLIA	NCE	VER	IFICATION					
	Meets standard		Policy and procedure manual review	Previous compliance documented				
	Needs improvement	$\boxtimes$	Sample of facility records reviewed	Other (specify):				
	Non-compliant		Sight confirmation by inspector					
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff					
Comments: Policy # 210.03 Process is under continual review, and all incidents are thoroughly reviewed by								
Management.								

### **HEALTH CARE**

DOC 350.13 Inmate health screening. The jail shall have policies and procedures for inmate health screening.

DOC 350.13 (1) Use of a health screening form that is developed in conjunction with health care professionals and is used at booking with each inmate to record information about medical, mental health and dental conditions, physical and developmental disabilities, alcohol or other drug abuse problems and suicide risk.

DOC 350.13 (2) Referrals to medical, mental health or supervisory staff in a timely manner in response to identified concerns. If urgent concerns are identified, the referral shall be immediate.

DOC 350.13 (3) Review of the health screening form by health care or other designated staff within 72 hours if non-urgent concerns are identified.

Review by health care provider is conducted and documented.

DOC 350.13 (4) Documentation of health screening results and subsequent review of the health screening form in an inmate's confidential file.

- Health screening forms are legible, accurate and complete, including detailed narratives when necessary.
- Health care professionals provided input into the content of the health screening form.
- The health screening form contains usable information relating to the inmate's medical condition, dental condition, medical disabilities, developmental disabilities, alcohol and other drug abuse and suicide risk.

<ul> <li>A health screening form is completed for each inmate booked into the facility.</li> <li>The health screening forms are reviewed for completeness, accuracy, legibility and the appropriateness of the decisions made regarding referral, housing, classification and other actions.</li> <li>The identity of the person completing the health screening form is documented.</li> </ul>						
COMPLIANCE	/ERIFICATION					
Meets standard	Policy and procedure manual review	Previous compliance documented				
Needs improvement	Sample of facility records reviewed	Other (specify):				
Non-compliant	Sight confirmation by inspector					
Not reviewed	Verbal confirmation by facility staff					
can refer offenders for treatment. All reinclude disposition in the medical file.	rms are provided for the request of medice equests are reviewed on a daily basis by r	medical staff and documented, to				
	be completed within 14 days after arrival at the evious 90 days. The health appraisal shall be cole physician.					
COMPLIANCE	/ERIFICATION					
Meets standard	Policy and procedure manual review	Previous compliance documented				
Needs improvement	Sample of facility records reviewed	Other (specify):				
Non-compliant	Sight confirmation by inspector					
Not reviewed	Verbal confirmation by facility staff					
Comments: Policy # 104.04 This is compincluded in this process.	leted and documented within the inmate's	medical file. Huber inmates are				

COMPLIANCE		VERIFICATION				
	Meets standard	Policy and procedure manual review	Previous compliance documented			
	Needs improvement	Sample of facility records reviewed	Other (specify):			
	Non-compliant	Sight confirmation by inspector				
	Not reviewed	∀ Verbal confirmation by facility staff				

Comments: Policy # 104.08 HSU space has increased over the past few years based on inmate populations. It is an area that is continually reviewed for efficiency of services. Implemented space changes are reportedly working well.

_	fice of Detention Facilities OC-2744 (4/2015)				
DOC		or sec	cure necessary medical and mental health	trea	ntment and emergency dental care for
	<ul> <li>All inmate requests for medical car</li> </ul>	re are r	o request medical assessment or treatment. eviewed by health care staff. quests are documented by health care staff r	mom	hore
CO1	•			пеш	Dels.
	MPLIANCE	VER	RIFICATION		Danida da a da a da a da a da da da da da da
<u> </u>	Meets standard		Policy and procedure manual review  Sample of facility records reviewed		Previous compliance documented
<u> </u>	Needs improvement				Other (specify):
<u> </u>	Non-compliant Not reviewed		Sight confirmation by inspector  Verbal confirmation by facility staff		
Com			lical staff on a daily basis to include v	W00	konds
Con	nments. Requests are reviewed by	y med	lical stall off a daily basis to include v	wee	kenus.
	C 350.14 (3) Health care staff shall b npliance shall be maintained at the fa		mpliance with state and federal licensure	cert	ification and registration. Verification of
	MPLIANCE	VEF	RIFICATION		
	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Com	nments: Licensures are maintaine	ed on	file at the facility.		
acco	<ul><li>ordance with s. 146.81 to s. 146.83, S</li><li>Medical record accessibility is limit</li></ul>	tats., a	separate from other records and shall be and any other applicable state or federal landary staff, the jail administrator and the administrator.	ws.	
	MPLIANCE	VER	RIFICATION	<u> </u>	
	Meets standard		Policy and procedure manual review		Previous compliance documented
<u> </u>	Needs improvement		Sample of facility records reviewed	Ш	Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Com	nments:				
	C 350.14 (6) Officers shall receive do eening at the time of admission.	ocume	nted annual training on health care policie	es ar	nd procedures, medications and health
	MPLIANCE	VEF	RIFICATION		
	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Com	nments: Policy # 104.02, 219.03 &	k 04 1	This was completed in March 2017 for	or a	Il officers.
DOC 350.15 Health care policy. The jail shall have policies and procedures for inmate health care.  DOC 350.15 (1) Documentation of health referrals made or health care provided.  DOC 350.15 (2) Maintenance of documents in an inmate's confidential file.					
CON	MPLIANCE	VEF	RIFICATION		
	Meets standard		Policy and procedure manual review	$\boxtimes$	Previous compliance documented
Ē	Needs improvement	一百	Sample of facility records reviewed	Ħ	Other (specify):

Sight confirmation by inspector

Verbal confirmation by facility staff

Non-compliant

Not reviewed

Comments: Policy # 104.02 & 224.01

		50.15 (3) Names, addresses and telency and routine health care service		ne numbers of health care providers or a	agenc	ies who have agreed to provide
eme	rge			minates.		
	•	Contact information is available to s				
COI	ИPL	IANCE	VEF	RIFICATION		
	<u> </u>	Meets standard		Policy and procedure manual review	$\boxtimes$	Previous compliance documented
		Needs improvement		Sample of facility records reviewed		Other (specify):
		Non-compliant		Sight confirmation by inspector		
		Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Con	nme	ents: Reviewed with HSU Mana	ger.			
DOC	35	50.15 (4) Referral of an inmate to ja	il hea	Ilth care staff or to other agencies that p	rovide	e health care.
	•	Health care referrals are made and				
001	101	Staff are knowledgeable about the h		•		
		IANCE	VEF	RIFICATION		
	<u> </u>	Meets standard		Policy and procedure manual review	$\underline{\underline{\vee}}$	Previous compliance documented
<u></u> _	<u> </u>	Needs improvement	$\underline{\hspace{0.1cm}}$	Sample of facility records reviewed	Ш	Other (specify):
	4	Non-compliant		Sight confirmation by inspector		
		Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Con	nme	ents: Reviewed with HSU Mana	ger.			
DOO	35	50.15 (5) Designation of staff who h	nave	authority to make health care decisions,	inclu	ding emergency medical and dental care.
DOC	, 3E	50 15 (6) Non-omorgoncy hoalth ca	ro in	cluding the use of an inmate's personal	nhvei	cian
DO	, ,,	o. 13 (0) Non-emergency health ca	16, 111	cluding the use of all lilliate's personal i	pilyai	ciaii.
CON	ИPL	IANCE	VEF	RIFICATION		
	$\overline{A}$	Meets standard		Policy and procedure manual review	$\boxtimes$	Previous compliance documented
		Needs improvement		Sample of facility records reviewed		Other (specify):
	1	Non-compliant		Sight confirmation by inspector		· · · · · · · · · · · · · · · · · · ·
		Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		
Con		ents: Reviewed with HSU Mana	ger.			
00		mor nonenea marrido mana	90			
DOC	35	50.15 (7) Schedule of inmate acces	s to r	outine medical care.		
		• •				
	•	The schedule of inmate access to make the list, or other appropriate means.	nedica	I care is provided to inmates in writing via h	andbo	ook, posted notice, inmate rule and regulation
			acce	ss medical care is provided if the inmates ar	re una	ble to read or write.
CO1	/IDI	IANCE		RIFICATION		
	VIF L	Meets standard	VER		$\boxtimes$	Dravious compliance documented
<u> </u>	<del>\</del>			Policy and procedure manual review	<u> </u>	Previous compliance documented
<u></u> _	┽	Needs improvement	<u> </u>	Sample of facility records reviewed		Other (specify):
	┽	Non-compliant		Sight confirmation by inspector		
L		Not reviewed		Verbal confirmation by facility staff		
Con	nme	ents: Sick call is available 7 day	s a v	veek.		
DOC	35	50.15 (8) Provision for inmates with	n chro	onic medical conditions.		
CON	ИPL	IANCE	VEF	RIFICATION		
	X	Meets standard		Policy and procedure manual review	$\boxtimes$	Previous compliance documented
Ī	Ť	Needs improvement	一一	Sample of facility records reviewed		Other (specify):
Ť	Ħ	Non-compliant	一一	Sight confirmation by inspector		
Ť	┪	Not reviewed	冈	Verbal confirmation by facility staff		
				· · · · · · · · · · · · · · · · · · ·		

Comments: Reviewed with HSU Manager.

DOC	350	0.15 (9) Procedure for processing in	ma	te medical requests on a daily basis.	
		Inmate medical requests are documen			
				e retained in inmate's confidential medical file.	
СОМ	PLI	ANCE \	/EF	RIFICATION	
$\overline{\triangleright}$	1	Meets standard		Policy and procedure manual review	Previous compliance documented
Ē	<u> </u>	Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed	Other (specify):
Ē	1	Non-compliant	Ħ	Sight confirmation by inspector	
	1		$\overline{\boxtimes}$	Verbal confirmation by facility staff	
Comi	men			staff on a daily basis to include weeker	nds.
	din	g emergency services.		are documented in the inmate's confidential me	and identification of the services provided,
COM	PLI	ANCE \	/EF	RIFICATION	
$\overline{}$	1	Meets standard		Policy and procedure manual review	Previous compliance documented
	Ī	Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed	Other (specify):
Ē	ī	Non-compliant	Ħ	Sight confirmation by inspector	= (4) <i>7</i> /
Ē	ī		$\overline{\boxtimes}$	Verbal confirmation by facility staff	
Comi	men	ts: Reviewed with HSU Manage	er.	, ,	
•	1	The jail health care providers, food ser care professional.	rvic	n care professional are documented in the inma e providers, and correctional staff are notified o	
	_		/EF	RIFICATION	
	<u> </u>	Meets standard	Щ	, .	Previous compliance documented
<u>L</u>	<u> </u>	Needs improvement	$\boxtimes$	Sample of facility records reviewed	Other (specify):
		Non-compliant		Sight confirmation by inspector	
		Not reviewed	$\boxtimes$	Verbal confirmation by facility staff	
Comi	men	ts: Process is reportedly working	g v	ery well. All are documented and note	book communication is utilized.
DOC	350	0.15 (12) Pregnancy management.			
COM	PLI	ANCE \	/EF	RIFICATION	
$oxed{\triangleright}$		Meets standard		Policy and procedure manual review	Previous compliance documented
		Needs improvement		Sample of facility records reviewed	Other (specify):
		Non-compliant		Sight confirmation by inspector	
		Not reviewed	$\boxtimes$	Verbal confirmation by facility staff	
Comi	men	ts: Reviewed with HSU Manage	er.		
DOC	350	0.15 (13) Maintenance of agreement	s b	etween the jail and providers of health care	services.
COM	PI I	ANCE \	/FF	RIFICATION	
		Meets standard	<u> </u>	Policy and procedure manual review	Previous compliance documented
	<u> </u>	Needs improvement	Η	Sample of facility records reviewed	Other (specify):
<u></u>	╅	Non-compliant	Η	Sight confirmation by inspector	
<u> </u> _	┪	Not reviewed	$\frac{\nabla}{\Box}$	Verbal confirmation by facility staff	
			<u> </u>		avestic Dublic Health December of
				ictually provided by the Fond du Lac Co ys per week of medical services and 40	•

provided. The HSU manager is Julie Treiber. Advanced Medical provides the Doctor Services, Mental Health and medical oversight for the facility and is on site once per week. Continued review of services and facility needs is an identified priority with facility management.

DOC 350.15 (14) Use of health transfer summary form under s. 302.388 (2), Stats.

Wisconsin State Statute 302.388 Prisoner medical records.

### (2) HEALTH SUMMARY FORM.

- (a) The department shall provide each jailer a standardized form for recording the medical conditions and history of prisoners being transferred to the department or another county's jail. Except as provided in pars. (b) and (bm), jail medical staff shall complete the form and provide it to the receiving institution intake staff at the time of each such transfer.
- (b) If the jail does not have medical staff on duty at the time of a transfer, the jailer or his or her designee shall complete as much of the form as possible and provide it to the receiving institution intake staff at the time of the transfer. The jailer shall ensure that all of the following occur within 24 hours after the transfer.
  - 1. The jail medical staff, the prisoner's health care provider or, if the prisoner does not have a health care provider, a health care provider under contract with the jail reviews the form provided to the receiving institution at the time of the transfer.
  - 2. The medical staff or health care provider reviewing the form corrects any errors in the form and includes in it any additional available information.
  - 3. The medical staff or health care provider reviewing the form transmits the updated form or the information included on the form by the quickest available means to the receiving institution intake staff.
- (bm) Jail medical staff need not complete the form if the jailer or his or her designee provides a copy of the prisoner's complete medical file to the receiving institution intake staff at the time of the transfer.
- (f) Receiving institution intake staff may make a health summary form available to any of the following:
  - 1. The prison's or jail's medical staff.
  - 2. A prisoner's healthcare provider.
  - 3. In the case of a prison or jail that does not have medical staff on duty at the time of the transfer, a health care provider designated by the department or the jailer to review health summary forms.
  - 4. In the case of a jail that does not have medical staff, a person designated by the jailer to maintain prisoner medical records.

COMPLIANCE	VERIFICATION						
Meets standard	Policy and procedure manual review Previous compliance documented						
Needs improvement	Sample of facility records reviewed Other (specify):						
Non-compliant	Sight confirmation by inspector						
Not reviewed	Verbal confirmation by facility staff						
Comments: This is reportedly working v	Comments: This is reportedly working very well.						
OOC 350.15 (15) Communicable disease and infection control. Policies and procedures relating to communicable disease and infection control shall contain all of the following components:							
<ul><li>(b) Documentation of the need for isolation</li><li>(c) Provision of laboratory screening for ir</li></ul>	n of inmates during isolation or quarantine under s. 252.06(6)(b), Stats. on or quarantine under s. 252.06(6)(b), Stats., in the inmate's confidential medical file. Inmates who may have been exposed to a communicable disease if ordered by medical personnel. waste and decontaminating medical and dental equipment in accordance with regulations.						
COMPLIANCE	VERIFICATION						
Meets standard	☐ Policy and procedure manual review ☐ Previous compliance documented						
Needs improvement	Sample of facility records reviewed Other (specify):						
Non-compliant	Sight confirmation by inspector						
Not reviewed	Verbal confirmation by facility staff						
Comments: Reviewed with HSU Manag	er.						
OC 350.15 (16) Detoxification and management of intoxicated inmates.							

Policy and procedure manual review

Sample of facility records reviewed

**VERIFICATION** 

Appropriate housing and supervision is provided.

COMPLIANCE

Meets standard

Needs improvement

Previous compliance documented

Other (specify):

Office	of Detention Facilities			WISCONSIN
	2744 (4/2015) Non-compliant		Sight confirmation by inspector	
-H	Not reviewed		Verbal confirmation by facility staff	
Comm			verbal committation by facility stair	
Comm	ents: Policy # 106.07 & 220.01			
and ad	Iministration of prescription and nor	-pre		procedures relating to the control, delivery treatments.
COMP	LIANCE	VEF	RIFICATION	
	Meets standard		Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff	
Comm	ents: Policy # 100.02 & 220.01			
	250.16 (2) Designated trained staff nented training shall be provided to j			of medication at prescribed times. Annua
COMP	LIANCE	VEF	RIFICATION	
	Meets standard		Policy and procedure manual review	Previous compliance documented
	Needs improvement	$\boxtimes$	Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	
$\overline{\Box}$	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff	
DOC 3 necess	sary.		personnel that all medications brought in by	y inmates or other persons for an inmate are
COMP	LIANCE		RIFICATION	. , ,
$\square$	Meets standard	$\overline{\Box}$	Policy and procedure manual review	Previous compliance documented
	Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed	Other (specify):
ᆸ	Non-compliant		Sight confirmation by inspector	
ᅢ	Not reviewed		Verbal confirmation by facility staff	
Comm			vised and is reportedly working well.	
Comm	enis. This process was previousi	y i <del>e</del>	vised and is reportedly working well.	
DOC 3	50.16 (4) All medications brought in	to th	e jail shall be inventoried and placed in sec	ure storage.
DOC 3	The storage of inmate medications m	nakes	I shall be stored in a locked drug cabinet the sthem readily identifiable.  kept in a separate, medical refrigerator, unless	
	locked container stored in a refrigera			
COMP	LIANCE	VEF	RIFICATION	
	Meets standard		Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant Sight confirmation by inspector			
Not reviewed Verbal confirmation by facility staff				
acces	sible to inmates. This process is		e facility are inventoried and maintained der ongoing review to ensure consiste	d in locked storage that is not ncy with inventory of all medications as
well a	s streamlining storage location.			

	2744 (4/2015)					
DOC 3	50.16 (6) Administration or delivery of	of p	rescription and nonprescription medication	ns t	o inmates.	
-	Personnel authorized to administer m	edi	cations are listed in the current policy and proc	edu	ure manual and accessible to all jail staff.	
COMP	LIANCE	VEI	RIFICATION			
$\square$	Meets standard		Policy and procedure manual review	X	Previous compliance documented	
	Needs improvement		Sample of facility records reviewed		Other (specify):	
	Non-compliant		Sight confirmation by inspector		· · · · · · · · · · · · · · · · · · ·	
	Not reviewed	X	Verbal confirmation by facility staff			
Comm	ents: Reviewed with HSU Manage	er.				
	g					
DOC 3	50.16 (7) Medication administered of	or c	lelivered to an inmate shall be documente	d. i	including who prescribed the medication.	
			and the date and time of administration or			
			r prescribed medications by an inmate sha		e documented. A health care	
profes	sional shall monitor the inmate in acc	core	dance with requirements of s. 302.384, State	S.		
	All medication documentation is comp	lete	e, accurate, and legible.			
-	The name of the pharmacist or qualification	ed l	nealth care professional, the full (not abbreviate			
		nistr	ation or delivery, and any special instructions of	or c	omments are documented for each	
	prescription medication.  The medication administration and de	live	ry records are reviewed by the health care pro	vid	er and/or iail administrator or designed for	
_	completeness, accuracy, and legibility		if y records are reviewed by the health care pro	viu	er and/or jail administrator or designee for	
-			cumentation and inmate refusals of medication	are	e clearly indicated and documented.	
COMP	LIANCE	VEI	RIFICATION			
	Meets standard	Г		$\boxtimes$	Previous compliance documented	
	Needs improvement	$\overline{X}$	Sample of facility records reviewed		Other (specify):	
一片	Non-compliant		Sight confirmation by inspector	<u> </u>	caror (opeony).	
一片	Not reviewed	X	, <u>, , , , , , , , , , , , , , , , , , </u>			
Comm		_	ear to be complete in documentation re	201	uirements. These logs are reviewed	
			g is incorporated annually (March 201			
	• • • • • • • • • • • • • • • • • • • •		Follow-up is done if documentation is	,		
			review. Refusals are documented, a			
	al is enforced per policy.	u ii	Treview. Trefasais are accumented, a	ıııa	the requirement of face to face	
	50.16 (9) Return of an inmate's medi	rati	on inventoried at admission			
<b>D</b> 000	oo. 10 (o) Notarii oi ari iiinate o iiicar	cut	on inventoriou at admission.			
DOC 3	50.16 (10) Inventory or disposal of u	nus	ed medications upon the inmate's release of	or t	ransfer.	
	<ul> <li>The return of an inmate's medication is documented.</li> <li>Unused medication is disposed of by a health care provider, transferred with the inmate, or returned to a pharmacy.</li> </ul>					
<ul> <li>Established protocols regarding the disposal of narcotic medications, including witness presence, are followed.</li> </ul>						
•			nedication is retained in the inmate's medical fi			
COMP	LIANCE	VEI	RIFICATION			
	Meets standard		Policy and procedure manual review		Previous compliance documented	
	Needs improvement	X	Sample of facility records reviewed	Π	Other (specify):	

Comments: Forms are utilized to streamline the continuity of this process.

Non-compliant

Not reviewed

Sight confirmation by inspector Verbal confirmation by facility staff

DO0 may	35 be	0.17 Suicide prevention. The jail shat risk of seriously injuring themselv	nall /es	have policies and procedures relating to	the	supervision and housing of inmates who
CON	MPL	IANCE V	/EF	RIFICATION		
	X	Meets standard		Policy and procedure manual review	$\boxtimes$	Previous compliance documented
		Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):
		Non-compliant		Sight confirmation by inspector		
		Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Com	nme	nts: Policy # 104.02 & 216.02				
DOC	35 cide	0.17 (1) Obtaining documented inf or self-harm.	fori	nation from the arresting or transporting	ag	ency to assess an inmate's potential for
CON	ИPL	ANCE V	/EF	RIFICATION		
	$\overline{X}$	Meets standard		Policy and procedure manual review	X	Previous compliance documented
Ī	1	Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed	Ħ	Other (specify):
Ī		Non-compliant		Sight confirmation by inspector		(1 2/
ī	┪		$\overline{\boxtimes}$	Verbal confirmation by facility staff		
Com			<u> </u>	eening form is utilized with each intake		
COII	11110	its. Attesting/Transport Officer 5	OI C	cerning form is difficed with each intake		
DOC 350.17 (2) Intake screening of inmates that includes interview items and staff observation related to potential suicide risk.  ■ Intake screening is performed on each new inmate.  ■ The answers to all screening questions are documented.  ■ The screening form is legible, accurate, and complete, including detailed narratives when necessary.  ■ Appropriate follow-up questions are asked and answers recorded, when suicide risk is indicated.  ■ Medical or mental health care professionals review intake screening reports when risk is indicated.  ■ A secondary security review of intake screening reports for completeness, accuracy, legibility, consistency, appropriateness of housing assignments, appropriateness of classification and risk assessments is conducted.  ■ COMPLIANCE  VERIFICATION  ■ Meets standard  ■ Policy and procedure manual review  ■ Previous compliance documented  ■ Needs improvement  ■ Sample of facility records reviewed  ■ Other (specify):					necessary. cated. dicated. lity, consistency, appropriateness of housing  Previous compliance documented	
	┪	Non-compliant Not reviewed	$\overline{\boxtimes}$	Sight confirmation by inspector  Verbal confirmation by facility staff		
DOC an ii	iew C 35	ed for potential revision.  0.17 (3) Procedure for placement of te on suicide watch shall include all Immediate notification to designated so Designation of housing areas and second	an of upe	inmate on suicide watch. Policies and prothe following components: ervisory staff if an inmate is identified as a suicide precautions for inmates who are placed on summates on suicide watch, including frequency	ide uici	dures relating to the procedure for placing risk. risk. ride watch.
CON	ИPL	IANCE V	/EF	RIFICATION		
	$\overline{X}$	Meets standard		Policy and procedure manual review		Previous compliance documented
	Ť	Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed	$\overline{\sqcap}$	Other (specify):
一片	┪	Non-compliant		Sight confirmation by inspector	<u> </u>	caror (opeony).
	╡	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		
Com	nme	nts: Policy # 106.05 Reviewed wi	ith	<u> </u>		
DOC	35	0.17 (4) Identification of trained pers	on	s who may assess an inmate's level of suic	cide	e risk.
CON	MPL	IANCE V	<u>/E</u> F	RIFICATION		
	X	Meets standard		Policy and procedure manual review		Previous compliance documented
		Needs improvement		Sample of facility records reviewed		Other (specify):
Ī		Non-compliant	ā	Sight confirmation by inspector		
Ī		Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		

Comments: Reviewed with Health Care Providers and Management. Agency has identifed QMHP they utilize.

			I health professionals within 12 hours of the last health professional shall be completed.		cement of a potentially suicidal inmate on
•			alified mental health professional are docu		
COM	PLIANCE	VER	IFICATION		
$\boxtimes$	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		
	nents: Form is utilized. This a bliance.	rea is co	ntinually under review by administr	ation	to ensure ongoing continuity and
	350.17 (6) Identification of qual s after an on-site face-to-face as			rized 1	to remove an inmate from a suicide watch
COM	PLIANCE	VER	IFICATION		
$\boxtimes$	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
	nents: ACH Mental Health is only DCP.	contracte	d 40 hours per week. After hours n	eeds	s are provided by Fond du Lac
•	is utilized.	staff, admi	nistration, and medical/mental health care		pers regarding inmates who are suicide risks
	PLIANCE	VER	IFICATION		
			Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
	uss on site collaboration with		ry good, and all are documented. I clients. This improves continuity of		
DOC	Staff demonstrate a working kn Staff are familiar with the location Staff received training on emergence	owledge of on and effe gency resp	apparent suicide attempt, including life first aid and emergency response measurective use of emergency response equipments, including use of emergency response in progress or suicide threat are documents.	res. ent. se equ	
COM	PLIANCE	VER	IFICATION		
$\boxtimes$			Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		(op-o)/.
<u> </u>	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		
Como		ved indic	· · · · · · · · · · · · · · · · · · ·	م الد	officers in March 2017 at the annual
	rvice training.	veu muit	ate this training was completed for	an O	micers in majori 2017 at the annual

		50.17 (9) Identification of person	ons to be	notified in case of attempted or complete	ed su	uicides.	
СО	MP	LIANCE	VEI	RIFICATION			
	$\boxtimes$	Meets standard		Policy and procedure manual review		Previous compliance documented	
		Needs improvement		Sample of facility records reviewed		Other (specify):	
		Non-compliant		Sight confirmation by inspector			
		Not reviewed	$\boxtimes$	Verbal confirmation by facility staff			
Coı	mm	ents: Reviewed with HSU M	anager.				
DO	(a) (b) (c)	50.17 (10) Documentation of act of the suicide with the s	atch.	d decisions regarding inmates who are s	uicid	le risks, including all of the following:	
	(e)	) Date and time supervisor contact Name, date, and time of referral	to mental mental he	alth professional removing an inmate from a	suic	cide watch including name, date and time.	
		LIANCE	VEI	RIFICATION			
	$\boxtimes$	Meets standard		Policy and procedure manual review		Previous compliance documented	
		Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):	
		Non-compliant		Sight confirmation by inspector			
		Not reviewed	$\boxtimes$	Verbal confirmation by facility staff			
Comments: Forms have been reviewed and updated to capture and reflect the above information.  DOC 350.17 (11) Implementation of 2 hours of annual documented staff training regarding suicide prevention and identification of risk							
fac				annaan accamonica cian maning regara	9 \		
CO	MP	LIANCE	VEI	RIFICATION			
	$\boxtimes$	Meets standard		Policy and procedure manual review		Previous compliance documented	
		Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):	
		Non-compliant		Sight confirmation by inspector			
		Not reviewed	$\boxtimes$	Verbal confirmation by facility staff			
Coı	mm	ents: This was completed at	the Spri	ing 2017 annual in-service training.			
DO	C 3	50.17 (12) Access by staff to d	ebriefing	and support services.			
CO	MP	LIANCE	VEI	RIFICATION			
	$\boxtimes$	Meets standard		Policy and procedure manual review		Previous compliance documented	
		Needs improvement		Sample of facility records reviewed		Other (specify):	
		Non-compliant		Sight confirmation by inspector			
		Not reviewed	$\boxtimes$	Verbal confirmation by facility staff			
		ents: Reviewed with Adminis		onal review following a suicide or signific	ant s	suicide attempt.	
		LIANCE	-	RIFICATION		•	
		Meets standard	V L I	Policy and procedure manual review		Previous compliance documented	
	$\frac{\square}{\square}$	Needs improvement		Sample of facility records reviewed			
	Η	Non-compliant		Sight confirmation by inspector		Other (specify):	
	+	Not reviewed		Verbal confirmation by facility staff			
Соі	mm	ents: Reviewed with Adminis	stration.	verbai commination by facility stail			

DOC-2744 (4/2015)

DOC 350.25 Administrative confinement. In this section, "administrative confinement" means a non-punitive, segregated confinement of an inmate in his or her cell or other designated area to ensure personal safety and security within the jail. The jail shall have policies and procedures outlining the administrative confinement proces.

DOC 350.25 (1) An inmate may be placed in administrative confinement if the inmate's continued presence in the general population meets one of the following:

- (a) Presents a substantial risk of physical harm to the inmate, another person or property.
- (b) Threatens the security and order of the jail.
- (c) Inhibits a pending disciplinary investigation.

COMPLIANCE		VERIFICATION		
	Meets standard	Policy and procedure manual review Previous compliance docu	mented	
	Needs improvement	Sample of facility records reviewed Other (specify):		
	Non-compliant	Sight confirmation by inspector		
	Not reviewed	Verbal confirmation by facility staff		

Comments: Policy # 211.16 Reviewed with Administration.

DOC 350.25 (2) A jail staff member shall inform his or her supervisor of any incident that may require administrative confinement of an inmate and the supervisor shall determine whether to place the inmate in administrative confinement. In the absence of his or her supervisor, a jail staff member may place an inmate in administrative confinement. The staff member's supervisor shall review that placement decision within 24 hours. This review shall include evaluation of inmate's classification.

COMPLIANCE		VERIFICATION	
$\boxtimes$	Meets standard	Policy and procedure manual review Prev	vious compliance documented
	Needs improvement	Sample of facility records reviewed Othe	er (specify):
	Non-compliant	Sight confirmation by inspector	
	Not reviewed	Verbal confirmation by facility staff	

Comments: Reviewed with Jail Administration. A form is being utilized, and all placements are documented and reviewed by Supervisors and Jail Administration. Confinement housing has to conform to the rules of the housing unit as prescribed through classification.

DOC 350.25 (3) An inmate's progress in administrative confinement shall be reviewed by a supervisor at least once every seven days. The supervisor shall determine when the inmate no longer presents a threat to the safety, security and order of the jail and may be released to the general population. Each review shall be documented.

COMPLI	ANCE	VER	IFICATION		
$\boxtimes$	Meets standard		Policy and procedure manual review	$\boxtimes$	Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		

Comments: Reviewed with Jail Administration. Jail Administrator advises that all cases are reviewed and documented on a daily basis by the Staff Sergeants, 3x per week by medical personnel, as well as on a weekly basis by Administration. The weekly documents are completed to describe reason for continued placement. Segregation reviews are recommended for all offenders who are placed in any type of segregation status. All records are maintained in the inmate's file.

2002:::(::20:0)	2002:11(112010)						
DOC 350.25 (4) The reason an inmate is placed in administrative confinement and the length of time the inmate remains in administrative confinement shall be documented in the inmate's file.							
The inmate is informed of the reasons a	and conditions of the inmate's Administrative Cor	finement.					
COMPLIANCE V	ERIFICATION						
Meets standard	Policy and procedure manual review	Previous compliance documented					
Needs improvement	Sample of facility records reviewed	Other (specify):					
Non-compliant [	Sight confirmation by inspector						
Not reviewed	Verbal confirmation by facility staff						
Comments: Forms are used and maintain	ned.						
	DECORDS AND DEDORTING						
	RECORDS AND REPORTING						
DOC 350.10 Records and reporting.							
DOC 350 10 (1) Register of inmates. Each in	il shall keep a register of all inmates. The reg	istor shall contain identifying information on					
	e, sex, race, court order, time and cause of p						
	escapes, the time and manner of the escape						
COMPLIANCE V	ERIFICATION						
Meets standard	Policy and procedure manual review	Previous compliance documented					
Needs improvement	Sample of facility records reviewed	Other (specify):					
Non-compliant [	Sight confirmation by inspector						
Not reviewed	Verbal confirmation by facility staff						
Comments: Records are computerized ar	nd maintained through the current softwa	are system, as well as in a handwritten					
ledger. The current software is through							
DOC 350.10 (2) Storage of records. Records shall be kept in a secure area. Juvenile records shall be kept separate from adult records and shall be maintained in a confidential manner in accordance with s. 938.396, Stats., and any other applicable federal or state law.							
COMPLIANCE V	ERIFICATION						
Meets standard	Policy and procedure manual review	Previous compliance documented					
Needs improvement	Sample of facility records reviewed	Other (specify):					
Non-compliant [	Sight confirmation by inspector						
Not reviewed	Verbal confirmation by facility staff						

Comments: All records are kept in a secure area. Juvenile records are maintained separate from adult records.

# MAINTENANCE OF JAIL, SANITATION AND CARE OF PRISONERS

Wisconsin State Statute 302.37 Maintenance of jail and care of prisoners.

Wisconsin State Statute 302.37 (1) (a) The sheriff or other keeper of a jail shall constantly keep it clean and in a healthful condition and pay strict attention to the personal cleanliness of the prisoners and shall cause the clothing of each prisoner to be properly laundered. The sheriff or keeper shall furnish each prisoner with clean water, towels and bedding. The sheriff or keeper shall serve each prisoner 3 times daily with enough well-cooked, wholesome food. The county board shall prescribe an adequate diet for the prisoners in the county jail.

Wisconsin State Statute 302.37(3)(a) The county or municipality shall furnish its jail with necessary bedding, clothing, toilet facilities, light and heat for prisoners

Wisconsin State Statute 302.37 (4) The sheriff or other keeper of a jail may use without compensation the labor of any prisoner sentenced to actual confinement in the county jail or, with the prisoner's consent, any other prisoner in the maintaining of and the housekeeping of the jail, including the property on which it stands. Any prisoner who escapes while working on the grounds outside the jail enclosure shall be punished as provided in s. 946.42.

- A daily inspection is conducted by jail staff of housekeeping, sanitation, and physical plant maintenance.
- The jail is constantly clean and in a healthful condition.
- Inmate areas are free of graffiti, posters, wall coverings, etching, etc.
- All surfaces, equipment, and facilities are clean and in good repair.
- Air handling systems, including ventilation screens and covers, are clean, unobstructed, and in good working order.
- Inmate personal property allowed in the housing units is subject to limitations on volume and content.
- Inmates are held accountable for making the beds, cleaning the floors, cleaning the common bathroom facilities, properly storing property, and maintaining cleanliness and order in the housing units daily.
- Inmates and staff are held accountable for housekeeping and sanitation deficiencies.
- Identified maintenance needs are addressed in a timely manner.
- Hallways are free of clutter and obstructions.

COMPLIANCE		VERIFICATION			
$\boxtimes$	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):
	Non-compliant	$\boxtimes$	Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		

Comments: Staff inspect the facility on a daily basis maintenance needs within the facility. Staff are doing a good job of supervising inmates to eliminate excess personal property, improving housing units. The accountability within the dayrooms is continually improving. Cleaning supplies are provided on a daily basis. Inmates are responsible to maintain cell areas in a clean manner or they will not be permitted to watch TV. There appears to be a good working relationship with the County Maintenance Department. Most maintenance issues are reportedly addressed in a timely manner. Emails are utilized to request work orders and are checked daily by Maintenance personnel. Inmate workers are responsible to do laundry within the facility. Hallways are clear of obstruction.

DOC 350.12 Sanitation and Hygiene. The jail shall have policies and procedures relating to sanitation and hygiene.						
DOC 350.12 (1) Facilities are required to be clean and in good repair.						
COMPLIA	ANCE	VER	RIFICATION			
$\boxtimes$	Meets standard		Policy and procedure manual review		Previous compliance documented	
	Needs improvement		Sample of facility records reviewed		Other (specify):	
	Non-compliant	$\boxtimes$	Sight confirmation by inspector			
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff			

Comments: Policy # 211.07 & 218.02

DOC-2744 (4/2015) DOC 350.12 (2) Blankets shall be laundered monthly and before reissue. DOC 350.12 (3) Sheets, pillowcases and mattress covers shall be changed and washed at least weekly and before reissue. DOC 350.12 (4) Clean towels shall be issued to each inmate twice a week. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: On the date of the inspection inmate confirmation was provided to confirm compliance. DOC 350.12 (5) Mattresses shall be provided where there is a need for overnight detention. Each mattress and each pillow, if used, shall be covered with a fire retardant, waterproof, easy-to-sanitize material. Mattresses and pillows shall be kept in good repair and in a clean and sanitary condition. The sheriff shall provide adequate bedding. Mattresses shall be cleaned and sanitized before reissue. DOC 350.12 (6) Suppliers of mattresses and pillows shall be provide evidence to the sheriff that the products are fire retardant, waterproof, and easy to clean. DOC 350.12 (7) Mattresses shall be of proper size to fit the bed. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: On the date of the inspection a spot check of mattresses appeared to be in good condition. Jail Administration is continually replacing any worn mattresses as needed and on a routine schedule according to budgetary allowances. DOC 350.12 (8) The sheriff shall provide an inmate whose clothing has been confiscated with adequate and appropriate clothing, including footwear, for use while the inmate is in custody. Footwear shall be cleaned and sanitized before reissue. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Reviewed with Administration. DOC 350.12 (9) Laundry schedule shall be established to meet daily needs. All issued and allowed clothing items are laundered twice weekly. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff

Comments: Compliance confirmation obtained from inmate interviews.

for ex	terminating rodents or insect	ts shall be	e prominently and distinctly labeled	ram. Containers of poisonous compounds used for easy identification of contents. Poisonous in a locked area not accessible to inmates.
COMP	LIANCE	VER	IFICATION	
	Meets standard		Policy and procedure manual review	Previous compliance documented
一百	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant	$\overline{\boxtimes}$	Sight confirmation by inspector	
	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff	
Comm	ents: Reviewed with Admini	stration.		
and hy	giene, including toothpaste an vided to inmates upon request	d toothbru	ısh, soap and comb. Basic feminine hy	es sufficient for the maintenance of cleanliness giene materials for females and toilet paper shall combs, shaving materials or feminine hygiene
	LIANCE	VER	RIFICATION	
	Meets standard		Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff	
Comm	ents: Reviewed with Admini	stration.		
traps ı	used for passing meals or othe	r items sha	all be kept sanitized.	non use and meals shall be kept sanitized. Door
	LIANCE	VER	RIFICATION	N 5
	Meets standard		Policy and procedure manual review	Previous compliance documented
$ \mu$	Needs improvement		Sample of facility records reviewed	Other (specify):
- $ otherwise$	Non-compliant		Sight confirmation by inspector	
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff	
	ents: Logs are utilized.  50.12 (13) Safety and sanitatio	n inspecti	ons of the jail are completed and docur	nented at a minimum of once monthly.
COMP	LIANCE	VFR	RIFICATION	
	Meets standard		Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	Силог (орослу).
一一	Not reviewed		Verbal confirmation by facility staff	
Comm				reviewed and forms were updated.
DOC 3	50.12 (14) Common use groon	ning tools	are disinfected and cleaned before reis	sue and are stored in a secure area.
COMP	LIANCE	VER	RIFICATION	
	Meets standard		Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff	
Comm	ents: Reviewed with Admini	stration.		

**DEPARTMENT OF CORRECTIONS WISCONSIN** Office of Detention Facilities DOC-2744 (4/2015) DOC 350.12 (15) Property storage containers shall be sanitized before reuse. Property storage containers may include bags, bins, totes and lockers. **COMPLIANCE** VERIFICATION Meets standard Previous compliance documented Policy and procedure manual review Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: All areas are sprayed with a sanitizer. DOC 350.12 (16) Trash is removed daily from all dayrooms. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Inmate verification. DOC 350.12 (17) Hazardous waste shall be disposed of according to government regulations. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Reviewed with Administration. **INMATE SERVICES** DOC 350.26 Grievance Process. The jail shall have policies and procedures relating to an inmate grievance process and ensure it is available to all inmates and includes at least one level of appeal. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy # 211.08 This process was previously under review by administration. The process in place is reportedly working well. DOC 350.27 Legal Access. The jail shall have policies and procedures to address inmates' access to the courts, their attorneys, and legal materials. COMPLIANCE **VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Verbal confirmation by facility staff Not reviewed

Comments: Policy # 211.10 Lexis Nexis is utilized.

DOC 350	0.28 Indigence. The jail shall have	poli	cies and procedures to address indigence	e.	
DOC 350	0.28 (1) The jail shall establish defi	nitic	ons and procedures to define indigence.		
DOC 350	0.28 (2) Inmates' access to health o	are,	programming and essential services is n	ot pr	recluded by inability to pay.
COMPLI	ANCE	VEF	RIFICATION		
$\square$	Meets standard		Policy and procedure manual review	$\boxtimes$	Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Commer	nts: Policy # 211.09 Reviewed w	/ith	Administration.		
				ct be	tween inmates and their families, friends,
attorney	s, the court system, government of	ticia	als and others.		
DOC 350	0.29 (1) Provision for staff inspection	on a	nd reading of non-privileged incoming an	nd ou	tgoing mail.
•	Staff demonstrate a working knowled	ge c	f the procedures for mail inspection.		
DOC 350	0.29 (2) Provision for the limited ins	spec	ction of incoming and outgoing privileged	l mail	l.
	, ,				
•	Staff demonstrate a working knowled	ge c	f the definition of privileged mail and the pro-	cedur	res for inspecting it.
COMPLI	ANCE	VEF	RIFICATION		
$\boxtimes$	Meets standard		Policy and procedure manual review	$\boxtimes$	Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
current	ly not logged. Logs are genera	lly	is available in the inmate handbook used as an investigative tool. It may alop documentation of inmate contac	be a	· · · · · · · · · · · · · · · · · · ·
	0.29 (3) Delivery of all non-privilege Inmate mail is delivered to inmates in		nd approved privileged incoming mail. mely manner.		
COMPLI	ANCE	VFF	RIFICATION		
	Meets standard		Policy and procedure manual review	П	Previous compliance documented
	Needs improvement	Ħ	Sample of facility records reviewed	Ħ	Other (specify):
	Non-compliant	Ħ	Sight confirmation by inspector		Cutor (opeony).
	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff		
Commer	ats: Inmate confirmed.		Total community of the state of		
DOC 350	0.29 (4) Inventory and disposition of	f co	ontraband items found in mail.		
•	Contraband items are inventoried and Contraband is promptly turned over to				
COMPLI			RIFICATION		
	Meets standard	<u> </u>	Policy and procedure manual review	$\boxtimes$	Previous compliance documented
	Needs improvement	$\frac{\square}{\square}$	Sample of facility records reviewed	$\frac{\square}{\square}$	
-	Non-compliant	뉘	Sight confirmation by inspector	_Ц	Other (specify):
$ \vdash$	Not reviewed	$\frac{\square}{\square}$	Verbal confirmation by facility staff		
Commer	its: Procedure is for the Shift Su	ıpe	rvisor to handle.		

Office of Detention Facilities DOC-2744 (4/2015) DOC 350.29 (5) Provision of postage to indigent inmates. **COMPLIANCE VERIFICATION** Previous compliance documented Meets standard Policy and procedure manual review Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Indigent inmates are provided personal postage as deemed needed in accordance with classification, and unlimited legal postage. DOC 350.29 (6) Provision for notifying inmates when outgoing or incoming mail is withheld. A non-delivery of mail form is completed and provided to the inmate when mail is confiscated, destroyed, or rejected. **VERIFICATION COMPLIANCE** Previous compliance documented Meets standard Policy and procedure manual review Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Form is used and maintained. DOC 350.30 Visitation. The jail shall have policies and procedures relating to visitation. DOC 350.30 (1) Establishment of a visiting schedule for family, friends, attorneys, and others. Attorney visits shall be allowed during reasonable hours, as long as security and daily routine are not unduly interrupted. DOC 350.30 (2) Establishment of procedures for requesting visitation during nonscheduled times. Accommodations are made for visits to occur at times other than scheduled visiting times. COMPLIANCE **VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: Policy # 211.10 Visitation guidelines are established and are explained within the jail rules and posted. Inmates are required to choose who will be on their visitation list. Visitation is based on classification, and they are allowed unlimited professional visitors. DOC 350.30 (3) Documentation of all visits through a visitor log or register. All non-jail staff members who enter the jail are documented on the visitor's log or other appropriate register. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented

Comments: Logs are documented with visitation information. Visitors are required to provide photo identification. Lockers are provided for professional visitors.

Sight confirmation by inspector

Sample of facility records reviewed

Verbal confirmation by facility staff

Other (specify):

Needs improvement

Non-compliant

Not reviewed

Offi	PARTMENT OF CORRECTIONS ce of Detention Facilities				WISCONSIN
	C-2744 (4/2015) 350.30 (4) Establishment of a sear	ch polic	cy of visitors and their possessions.		
•	<ul> <li>Personal contact visitors are subjective</li> <li>Program workers and volunteers apolicies.</li> <li>Law enforcement/Community Community be subject to search.</li> </ul>	ect to a sare subj	search procedure. ect to strict guidelines regarding personal		carry-in equipment and compliance with jail rectional practices limiting carry-in items and
COM	IPLIANCE	VER	RIFICATION		
$\triangleright$	Meets standard		Policy and procedure manual review	$\boxtimes$	Previous compliance documented
Ī	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
	ments: Reviewed with Administr				
	350.30 (5) Posting of visitation poinmates.	olicies a	and procedures, including visitation so	hedul	e, in a place readily accessible to visitors
COM	IPLIANCE	VER	RIFICATION		
$\triangleright$	Meets standard		Policy and procedure manual review	$\boxtimes$	Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant	$\boxtimes$	Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Com	ments: All rules are within the in	mate h	andbook and posted in the lobby.		
DOC	350.30 (6) Establishment of a sear	ch polic	cy for inmates before and after each vis	it.	
COM	IPLIANCE	VER	RIFICATION		
$\triangleright$	Meets standard		Policy and procedure manual review	$\boxtimes$	Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Com	ments: Policy # 212.01 Reviewe	ed with	Administration.		
	350.31 Programs and services. Tices.	The jail	shall have policies and procedures re	lating	to the provision of inmate programs and
рос	350.31 (1) Use of community resor	urces, c	ontract providers, and volunteers author	orized	by the sheriff.
DOC	350.31 (2) Notification to inmates	of availa	ability, eligibility, and schedules.		
DOC	350.31 (3) Conducting criminal back	ckgrour	nd checks on all volunteers, community	resou	rces, and contract providers.
DOC	350.31 (4) Orientation and training	on faci	lity operations for all volunteers.		
	350.31 (5) Educational program	ming fo	or inmates who are under 18 years o	f age	consistent with the requirements of the
		\/⊏□	HEICATION		
	IPLIANCE  Mosts standard	VER	REFICATION		Provious compliance decurs sate d
			Policy and procedure manual review		Previous compliance documented
<u> </u>	Needs improvement		Sample of facility records reviewed	Ш	Other (specify):
L	Non-compliant		Sight confirmation by inspector		

Verbal confirmation by facility staff

Comments: Policy # 211.17 Reviewed with Administration.

Not reviewed

DOC-2744 (4/2015) DOC 350.32 Religious programming. Inmates shall have the opportunity to participate in practices of their religious faith consistent with existing state and federal statutes. The jail shall have policies and procedures relating to religious programming. DOC 350.32 (1) Identification of religious organizations and clergy willing to conduct religious services in the facility. DOC 350.32 (2) Notification to inmates of the schedule of religious services available in the jail. Staff demonstrate a knowledge of the procedure for assessing and responding to inmate requests for religious services. COMPLIANCE **VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Policy # 211.02 This is included within the jail rules handbook. DOC 350.32 (3) Identification of religious items that may be kept on an inmate's person or in the cell. If religious items are permitted, the policies are consistently applied throughout the jail. COMPLIANCE VERIFICATION Previous compliance documented Meets standard Policy and procedure manual review Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Reviewed with Administration. DOC 350.32 (4) Conducting criminal background checks on members of a religious organization and clergy. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Reviewed with Administration. DOC 350.32 (5) Orientation and training on facility operations for all volunteers. Documentation of the orientation and volunteer agreement is on file. COMPLIANCE **VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Reviewed with Administration.

		44 (4/2015)  .33 Recreation. The iail shall have	po	licies and procedures relating to recreation	)_	
		·	-		•	
DOC	350	.33 (1) Identification of the recreation	ona	Il activities that are available.		
DOC	350	.33 (2) Schedule of recreational act	ivit	ies.		
CON	1PLI/	ANCE \	/EF	RIFICATION		
		Meets standard		Policy and procedure manual review		Previous compliance documented
		Needs improvement	$\underline{\boxtimes}$	Sample of facility records reviewed		Other (specify):
		Non-compliant	Щ	Sight confirmation by inspector		
L			$\boxtimes$	Verbal confirmation by facility staff		
Com	men	ts: Policy # 222.03				
D00		22 (2) When and other accellable				in andalida dan asli an andala ana
				east one hour of daily exercise and recreati	ion	is outside the cell or outdoors.
		ANCE \	/EF	RIFICATION	_	
	₫	Meets standard		Policy and procedure manual review	$\underline{\sqcup}$	Previous compliance documented
	<u> </u>	Needs improvement	Щ	Sample of facility records reviewed		Other (specify):
	_	Non-compliant	Щ	Sight confirmation by inspector		
		Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Com	men	ts: Reviewed with Administration	n.			
DOC	350	34 Publications The jail shall have	n e	plicies and procedures relating to access to	n ni	ublications
	, 000	.o. r abilioationo. Tho jan onan have	, Þ.	sholos and procedures relating to decess to	, P	
DOC	350	.34 (1) Provision of publications of	ge	neral interest for inmates such as books, n	ew	spapers and magazines.
DOC	350	34 (2) Identification of publications	s th	at are prohibited for inmates because their		antent creates a security risk
	, 550	.o+ (2) Identification of publications	,	at the promoted for initiates because their		michi ordates a security risk.
	- 1	Reading material restrictions are poste	ed c	or otherwise accessible to inmates.		
DOC	350	34 (3) Inspection of publications b	roi	ight by visitors for inmates if the jail allows	· vic	sitors to bring in reading materials
DOC	, 330	.34 (3) Inspection of publications b	100	ight by visitors for iniliates if the Jan anows	) VI	sitors to bring in reading materials.
				rsonal reading materials that can be kept in the	e ho	ousing area, and these limitations are
		enforced consistently throughout the ja All reading materials allowed to be bro		nt in by visitors are subject to search		
CON		•		RIFICATION		
		Meets standard		Policy and procedure manual review	$\Box$	Previous compliance documented
	<del>-</del>	Needs improvement	$rac{\square}{}$	Sample of facility records reviewed	片	
	$\frac{1}{1}$	Non-compliant	${\color{red} H}$	Sight confirmation by inspector	Ш	Other (specify):
	+	-	$\square$	Verbal confirmation by facility staff		
				verbal committation by facility stain		
Com	men	ts: Policy # 211.14				
DOC	350	.35 Canteen. The jail shall have n	olio	ies and procedures for the establishment	and	d use of canteen, vending or other similar
		for inmates.	····	nos una procedures for the establishment	<b>u</b>	a abo of cantoon, vonamy or other ominar
DOC	350	.35 (1) Canteen shall be made avail	ab	e to eligible inmates.		
DOC	350	.35 (2) Access to canteen may be re	est	ricted by the facility based upon inmate cla	ıssi	ification or status.
COM	IPL I	ANCE	/FF	RIFICATION		
		Meets standard	$\overline{\Box}$	Policy and procedure manual review	П	Previous compliance documented
	$\exists$	Needs improvement	$\exists$	Sample of facility records reviewed	Ħ	Other (specify):
一片	┪	Non-compliant	ᅢ	Sight confirmation by inspector	<u></u>	(0500.)/.
一片	<del>1</del>	·	$\overline{\mathbb{X}}$	Verbal confirmation by facility staff		
Com	men			ation advises that the canteen service	th	ev are provided seems to be going
				Services. A kiosk is located in the jai		
•				account. They also allow movies to		•

			FOOD SERVICE		
DOC 3	350.11 Food Service. The jail s	hall have p	policies and procedures relating to food	serv	ice.
DOC 3	350.11 (1) The jail shall provide	nutritious	and quality food for all inmates.		
				comn	eleted and maintained in the facility files.
	PLIANCE		IFICATION	,omp	leted and maintained in the facility mes.
	Meets standard	V E I Y	Policy and procedure manual review	$\overline{}$	Previous compliance documented
$\overline{}$	Needs improvement		Sample of facility records reviewed	- <b>-</b> -	Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Kitch	en Manager Debra Boelk.	Menus fo	s currently provided by Sheriff's De r a 90 day period were reviewed. I ficant complaints were received wi	Menu	
			·		
	350.11 (3) An annual inspection nenting that the food service a			il by a	a qualified, independent outside source
COMF	PLIANCE	VER	RIFICATION		
$\boxtimes$	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Comm	ents: Kitchen is inspected b	y Departr	nent of Health Sanitarian. The mos	st rec	cent inspection was 10/03/2017.
DOC 3	350.11 (4) Internal monthly ins	pection of t	he food service area is completed and	docui	mented.
COMF	PLIANCE	VER	IFICATION		
$\boxtimes$	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\boxtimes$	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	$\boxtimes$	Verbal confirmation by facility staff		
Comm	ents: Forms are utilized and	l maintair	ed. These are completed daily and	om t	nthly.
	350.11 (5) The kitchen area and nented.	l all equipn	nent are maintained in a sanitary condit	ion. I	Routine inspections are completed and
COMF	PLIANCE	VER	RIFICATION		
$\boxtimes$	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
一一	Non-compliant		Sight confirmation by inspector		- \^1 \^7 \II'
	Not reviewed		Verbal confirmation by facility staff		
Comm	nents: Forms are utilized and	l maintair	ed. These are completed daily and	om b	nthly.
					-
	350.11 (6) Three nutritious me ny food service demands, provi			riatio	ns may be allowed based on weekend an
COMF	PLIANCE	VER	IFICATION		
$\boxtimes$	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		· · · · · · · · · · · · · · · · · · ·
	Not reviewed		Verbal confirmation by facility staff		
Comm	nents:				

7-2144 (4/2013)		
350.11 (7) Food temperatures a	are properly maintained.	
·	<u> </u>	
		Previous compliance documented
<u> </u>		Other (specify):
nents: Forms are utilized and	d maintained.	
iners that are labeled and dated	d. Food items are stored in appropriate locations a	
PLIANCE	VERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	
Not reviewed	Verbal confirmation by facility staff	
nents:		
	orders is maintained.	
Meets standard		Previous compliance documented
		Other (specify):
'		
Not reviewed		
nents: Forms are utilized and		
PLIANCE	VERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	
Not reviewed	Verbal confirmation by facility staff	
nents: Reviewed with Kitcher	n Manager.	
	Documentation of daily food p Documentation of periodic ser  PLIANCE  Meets standard Needs improvement Non-compliant Not reviewed  Meets standard Needs improvement  Documentation of daily cooler  PLIANCE  Meets standard Needs improvement Non-compliant Not reviewed  Meets:  350.11 (9) Special diets are pro Documentation of special diet  PLIANCE  Meets standard Needs improvement Non-compliant Not reviewed  Meets standard Needs improvement Non-compliant Not reviewed  Meets: Forms are utilized and  350.11 (10) An inmate may abs provide a substitute from other  CIANCE  Meets standard Needs improvement Non-compliant Not reviewed  Meets standard Needs improvement Non-compliant Not reviewed  Needs improvement Non-compliant	Documentation of daily food preparation temperatures is maintained.

	fice of Detention Facilities DC-2744 (4/2015)				
DOC	C 350.11 (11) Inmates assigned to	the kito	then who prepare or serve food shall ba	the	or shower daily and be provided a clean
unif	orm.				
	C 350.11 (12) No person who is kno food handler in a facility.	wn to be	e infected with any illnesses transmittable	by	food or utensils may be employed or work
hand	C 350.11 (13) All persons who work ds clean at all times when engaged uning of the fingernails.	in food in the h	service areas shall wear clean garments a andling of food, drink, utensils or equipm	nd ien	clean caps or hairnets and shall keep their t. Particular attention shall be given to the
CON	MPLIANCE	VER	RIFICATION		
	Meets standard		Policy and procedure manual review	Т	Previous compliance documented
Ī	Needs improvement		Sample of facility records reviewed	T	Other (specify):
Ī	Non-compliant		Sight confirmation by inspector		- (1 2)
	Not reviewed	$\overline{\square}$	Verbal confirmation by facility staff		
Com	nments: Reviewed with Kitchen N	Manage	er.		
DOC	2 250 11 (14) Inmete werkers are pr	ovidad a	prientation and training prior to assignmer	٠ <b>٠</b> ا،	n the kitchen area
DOC	5 330.11 (14) illiliate workers are pr	ovided (	orientation and training prior to assignmen	ונ וו	ii tiie kitciieii area.
	<ul> <li>Documentation of orientation and</li> </ul>	training	is maintained.		
CON	MPLIANCE	VER	RIFICATION		
	Meets standard		Policy and procedure manual review	Π	Previous compliance documented
Ī	Needs improvement		Sample of facility records reviewed	Ī	Other (specify):
	Non-compliant	$\Box$	Sight confirmation by inspector		- ( ; ),
	Not reviewed	$\overline{\square}$	Verbal confirmation by facility staff		
Com	nments: Reviewed with Kitchen N	Manage	er-forms have been developed and ar	e k	peing maintained.
			•		
DOC	C 350.11 (15) Inmate workers are su	pervise	d throughout all aspects of food preparation	on :	and service.
CON	MPLIANCE	VER	RIFICATION	_	
	Meets standard		Policy and procedure manual review	Т	Previous compliance documented
Ī	Needs improvement		Sample of facility records reviewed	T	Other (specify):
	Non-compliant	$\overline{\square}$	Sight confirmation by inspector		- ( ; ),
	Not reviewed		Verbal confirmation by facility staff		
Com	nments: Reviewed with Kitchen N	Manage	er.		
DOC	C 350.11 (16) Food and drink shall b	oe protec	cted from contamination. Meals are cover	ed	during transit to and within the facility.
	MPLIANCE		RIFICATION		
	Meets standard	V L I	Policy and procedure manual review	$\vdash$	Previous compliance documented
			Sample of facility records reviewed	늗	<u>.</u> 1
	Needs improvement		Sight confirmation by inspector	_	Other (specify):
	Non-compliant  Not reviewed		Verbal confirmation by facility staff		
		4		—	
Com	nments: Reviewed with Kitchen N	vianage	er.		
DOC	C 350.11 (17) Kitchen food storage a	and dish	washing equipment temperatures are rou	tine	ely monitored and documented.
CON	MPLIANCE	VER	RIFICATION		
	Meets standard		Policy and procedure manual review	Т	Previous compliance documented
Ť	Needs improvement		Sample of facility records reviewed	Ť	Other (specify):
Ī	Non-compliant		Sight confirmation by inspector	_	
Ī	Not reviewed		Verbal confirmation by facility staff		

Comments: Logs are maintained.

DOC-2144 (4/2013)		d amplied delly and are kept along			
DOC 350.11 (18) Garbage containers ar	e covere	u, emptied dany, and are kept clean.			
COMPLIANCE VERIFICATION					
Needs improvement		Sample of facility records reviewed		Other (specify):	
Non-compliant	$\boxtimes$	Sight confirmation by inspector			
Not reviewed	$\boxtimes$	Verbal confirmation by facility staff			
Comments:					
DOC 350.11 (19) Cleaning agents are st	tored sep	arately from food service items.			
COMPLIANCE	VERI	FICATION			
Meets standard		Policy and procedure manual review	$\boxtimes$	Previous compliance documented	
Needs improvement		Sample of facility records reviewed		Other (specify):	
Non-compliant	$\boxtimes$	Sight confirmation by inspector			
Not reviewed	$\boxtimes$	Verbal confirmation by facility staff			
Comments:					
DOC 350.11 (20) A security procedure i	s in place	e to control and account for sharps, tool	s an	d utensils at all times.	
<ul> <li>Documentation of daily control an</li> </ul>	nd invento	ry is maintained.			
COMPLIANCE	VERI	FICATION			
Meets standard		Policy and procedure manual review		Previous compliance documented	
Needs improvement		Sample of facility records reviewed		Other (specify):	
Non-compliant		Sight confirmation by inspector		` ' ' '	
Not reviewed		Verbal confirmation by facility staff			
Comments: Forms are utilized and in	nclude si	an out and sign in provisions.			